# **Expansion Report**

December 12, 2018



# Targeted Adult Medicaid (TAM) Enrollment by Subgroup

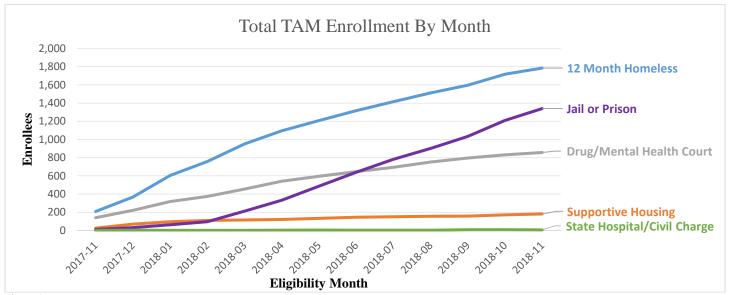


Figure 1

## TAM Enrollment by Month

#### FY18

TAM Category	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06
12 Month Homeless	208	367	604	758	950	1,095	1,208	1,316
Supportive Housing	25	70	96	109	115	120	133	145
Drug/Mental Health Court	140	220	317	374	455	540	595	646
Jail or Prison	11	30	62	96	212	331	486	639
State Hospital/Civil Charge	1	3	1	1	1	3	5	2
Total	385	690	1,080	1,338	1,733	2,089	2,427	2,748

Table 1a

## FY19

TAM Category	2018-07	2018-08	2018-09	2018-10	2018-11
12 Month Homeless	1,415	1,512	1,596	1,718	1,785
Supportive Housing	151	155	158	172	181
Drug/Mental Health Court	694	752	795	831	857
Jail or Prison	782	901	1,033	1,209	1,340
State Hospital/Civil Charge	3	3	7	8	6
Total	3,045	3,323	3,589	3,938	4,169

Table 1b

#### **Notes:**

Enrollment as of December 12, 2018. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

## **Targeted Adult Medicaid Reimbursements**

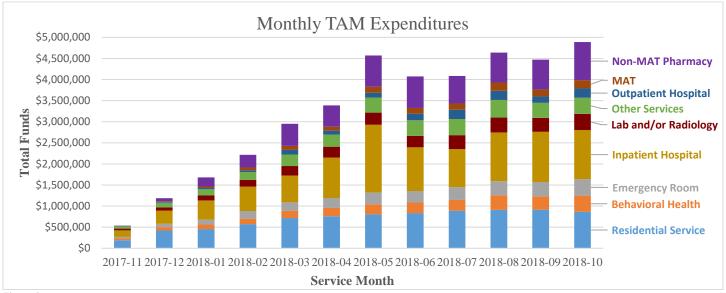


Figure 2

riguie 2													
Monthly Expend	litures (ii	n thousai	nds)				F	Y18	FY19				Total
Service Type	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Total
Residential Serv.	\$191	\$423	\$455	\$574	\$716	\$758	\$806	\$834	\$891	\$909	\$916	\$866	\$8,339
Behavioral Health	\$40	\$77	\$112	\$128	\$176	\$196	\$237	\$250	\$253	\$344	\$317	\$380	\$2,511
Emergency Room	\$38	\$82	\$113	\$182	\$197	\$237	\$281	\$273	\$305	\$334	\$338	\$391	\$2,773
Inpatient Hospital	\$156	\$311	\$454	\$576	\$638	\$959	\$1,604	\$1,037	\$903	\$1,158	\$1,190	\$1,166	\$10,152
Lab & Radiology	\$42	\$78	\$117	\$158	\$223	\$259	\$290	\$273	\$329	\$351	\$329	\$380	\$2,830
Other Services	\$51	\$108	\$147	\$186	\$274	\$284	\$356	\$368	\$385	\$420	\$358	\$384	\$3,322
Outpatient Hosp.	\$8	\$19	\$31	\$45	\$111	\$94	\$111	\$156	\$220	\$215	\$151	\$219	\$1,377
MAT	\$3	\$11	\$36	\$66	\$92	\$95	\$145	\$136	\$147	\$196	\$169	\$198	\$1,296
Non-MAT Pharm.	\$8	\$77	\$214	\$300	\$525	\$504	\$739	\$747	\$652	\$712	\$702	\$901	\$6,082
Grand Total	\$538	\$1,187	\$1,680	\$2,215	\$2,952	\$3,386	\$4,570	\$4,073	\$4,085	\$4,640	\$4,470	\$4,887	\$38,683

Table 2

<b>Distinct Member</b>	s Served	l					F	Y18		FY	19	
Service Type	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10
Residential Serv.	93	134	186	221	252	279	265	294	305	317	312	293
Behavioral Health	78	153	255	324	418	497	575	607	646	755	778	734
Emergency Room	54	110	177	236	261	298	353	366	393	430	434	483
Inpatient Hospital	18	28	40	57	60	75	93	84	82	123	91	104
Lab & Radiology	67	114	231	256	343	369	433	453	496	554	571	613
Other Services	225	498	909	1,169	1,547	1,933	2,206	2,585	2,859	3,188	3,465	3,808
Outpatient Hosp.	13	31	66	84	129	148	188	198	206	301	274	321
MAT	8	22	67	111	143	169	199	232	240	290	287	350
Non-MAT Pharm.	39	142	267	460	626	732	881	951	1,064	1,206	1,231	1,447
Grand Total	288	564	972	1,227	1,591	1,986	2,270	2,635	2,910	3,237	3,506	3,838

Table 3

- Monthly expenditures represent total fund payments to providers. Expenditures may not precisely sum up to total due to rounding.
- These total fund amounts consist of federal funds, state restricted funds, and hospital share.
- Pharmacy expenses shown here are subject to future reductions due to rebates.
- The months shown here represent the month of service, which is not necessarily the month of payment. They are subject to change with future billings and adjustments. Providers may bill up to one year after the date of service.

## **Expansion Parents Enrollment**

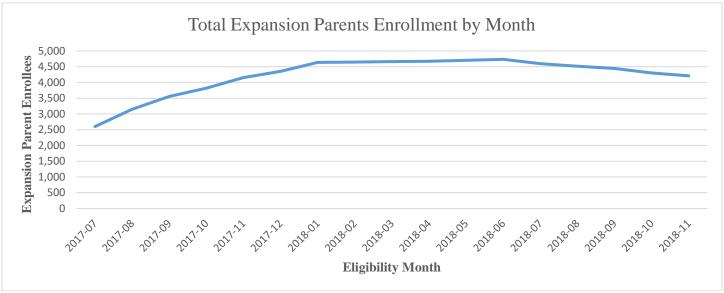


Figure 3

## **Expansion Parents Enrollment by Month**

### FY18

Category	2017-07	2017-08	2017-09	2017-10	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06
<b>Expansion Parents</b>	2,600	3,150	3,554	3,820	4,153	4,355	4,639	4,647	4,661	4,674	4,705	4,734

Table 4a

#### FY19

Category	2018-07	2018-08	2018-09	2018-10	2018-10
Expansion Parents	4,598	4,515	4,442	4,304	4,212

Table 4b

#### **Notes:**

Enrollment as of December 12, 2018. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage

# **Expansion Parents Reimbursements**

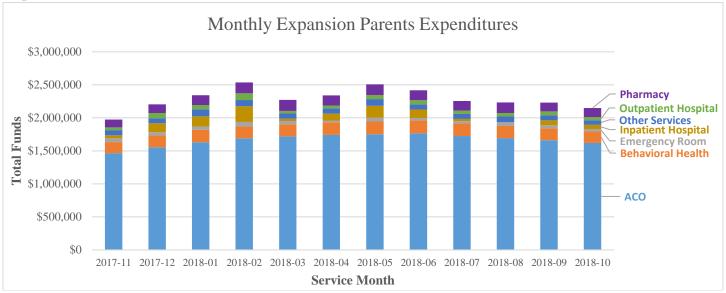


Figure 4

riguic 4															
Monthly Expendit	Monthly Expenditures (in thousands)							FY18				FY19			
Service Type	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Total		
ACO	\$1,465	\$1,555	\$1,630	\$1,691	\$1,721	\$1,742	\$1,753	\$1,766	\$1,726	\$1,693	\$1,661	\$1,620	\$20,023		
Behavioral Health	\$167	\$177	\$189	\$179	\$180	\$192	\$193	\$196	\$187	\$184	\$180	\$175	\$2,198		
Emergency Room	\$60	\$52	\$52	\$68	\$51	\$25	\$58	\$37	\$38	\$51	\$46	\$35	\$573		
Inpatient Hospital	\$46	\$135	\$152	\$238	\$34	\$104	\$179	\$128	\$33	\$5	\$74	\$64	\$1,191		
Other Services	\$76	\$76	\$106	\$95	\$81	\$81	\$103	\$78	\$75	\$88	\$77	\$70	\$1,008		
Outpatient Hospital	\$41	\$80	\$67	\$101	\$39	\$44	\$61	\$62	\$51	\$53	\$58	\$48	\$704		
Pharmacy	\$120	\$130	\$148	\$164	\$166	\$152	\$162	\$150	\$146	\$161	\$133	\$136	\$1,769		
Grand Total	\$1,976	\$2,205	\$2,344	\$2,536	\$2,272	\$2,340	\$2,508	\$2,417	\$2,255	\$2,235	\$2,230	\$2,149	\$27,467		

Tabla	4
i abie	

<b>Distinct Members</b>	Served				F	Y18	FY19					
Service Type	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10
ACO	3,083	3,264	3,430	3,573	3,639	3,693	3,711	3,736	3,637	3,578	3,513	3,411
Behavioral Health	4,078	4,291	4,566	4,582	4,594	4,620	4,624	4,655	4,539	4,448	4,368	4,243
Emergency Room	56	56	58	59	56	46	55	50	58	49	50	40
Inpatient Hospital	10	14	10	17	6	10	19	10	6	6	5	6
Other Services	245	268	363	289	303	285	310	279	242	279	259	252
Outpatient Hospital	74	. 89	104	85	81	76	93	74	57	70	73	70
Pharmacy	858	917	1,030	958	1,007	950	992	949	933	983	899	919
Grand Total	4,108	4,321	4,600	4,614	4,628	4,647	4,660	4,695	4,572	4,479	4,402	4,278

Table 6

#### **Notes:**

- Monthly expenditures represent total fund payments to providers and managed care organizations. Monthly expenditures may not precisely sum up to total due to rounding.
- These total fund amounts consist of federal funds, state restricted funds, hospital share and county funds for behavioral health.
- Pharmacy expenses shown here are subject to future reductions due to rebates.
- The months shown here represent the month of service, which is not necessarily the month of payment. They are subject to change with future billings and adjustments. Providers may bill up to one year after the date of service.
- Distinct members served by Accountable Care Organizations (ACO) and Behavioral Health include members covered on a managed care plan whether or not the member accessed services in the month.
- Expenditures shown here are the most recent twelve months. Older months are not shown.